

## MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ASAP LINEN

27220027-1

1. MONTH OF NOVEMBER 1, 2008 THRU NOVEMBER 30, 2008
2. Is Outlet # (8 digit) Correct? Y N N/A
3. Is average Total flow-gal.day stated in space provided? Y N N/A
4. Is max. Total flow-gal day stated in space provided? Y N N/A
5. Is method used to calculate water stated? Y N N/A
6. Are number of working days stated? Y N N/A
7. Are there any parameters which have exceeded PVSC Local Limits? Y N N/A
8. Is proper compliance/non-compliance statement provided? Y N N/A
9. Have correct number of samples been submitted? Y N N/A
10. Has PHC result been listed on MR-1 report? Y N N/A
11. Has sample number been reported in space provided? Y N N/A
12. Have all regulated parameters been listed on MR-1? Y N N/A
13. Has sample type been stated on MR-1? Y N N/A
14. Have all samples been taken during this reporting period? Y N N/A
15. Has NJDEPE certified lab been used? Y N N/A
16. Have analytical results been submitted on copies of Laboratory stationery? Y N N/A
17. Have results been written in space designated on MR-1? Y N N/A
18. Is correct method used to preserve samples stated on MR-1? Y N N/A
19. Has MR-1 been signed by authorized representative? Y N N/A
20. Has information been submitted on proper MR-1 form? Y N N/A
21. Remove Arsenic from report if sampling not required Y N N/A

## MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ASAP LINEN

27220027

First Reviewer: comments on deficiencies COMPLETEDate Reviewed 1/13/09 Date sent to user \_\_\_\_\_Date due back \_\_\_\_\_ Reviewer C.J.M.

Second review comments on deficiencies

Date Reviewed \_\_\_\_\_ Date sent to user \_\_\_\_\_

Date due back \_\_\_\_\_ Reviewer \_\_\_\_\_

Date \_\_\_\_\_ Reviewer \_\_\_\_\_

CALVIN

**PRETREATMENT MONITORING REPORT**Name: ASAP LINEN, INC.Mailing Address: 36 – 38 Iowa Avenue, Paterson, NJ 07503

JAN - 2 2008

Facility Location: 36 – 38 Iowa Avenue, Paterson, NJ 07503Category & Subpart: 9999 Outlet#: 1Contact Official: Mitchell Smith Telephone#: 973-684-7600NEW CUSTOMER ID / OUTLET ID: 27220027-1

MONITORING PERIOD						AVERAGE	MAXIMUM
11	1	2008	11	30	2008	Regulated flow-gal/day	N/A
MON	DAY	YR	MON	DAY	YR	Total Flow-gal/day	17,484
START			END			Method Used: Average total flow for Local Limits from incoming purchase water meter, minus 5% evaporation divided by 22 work days in month. Max = Avg + 20%.	
Parameter	(4)		Mass or Concentration			No. of Samples	Sample type
			Mon Avg	Maximum	Units		Comp./grab
Zinc	Sample measurement		0.031	N/A	"	1	Comp.
	Permit requirement		1.67	N/A	"		
	Sample measurement						
	Permit requirement						
	Sample measurement						
	Permit requirement						
	Sample measurement						
	Permit requirement						
	Sample measurement						
	Permit requirement						
	Sample measurement						
	Permit requirement						
	Sample measurement						
	Permit requirement						

**PRETREATMENT MONITORING REPORT**

**Certification of Non-use (use additional sheets if necessary)** As per approval by the PVSC,  
ASAP Linen, Inc. is certifying non-use for Cadmium, Copper, Mercury, Nickel and Lead for this  
month.

**Compliance or non-compliance statement with compliance schedule (use additional sheets if necessary) for every parameter used:** ASAP Linen, Inc., was in compliance with the PVSC Local  
Metal Limits for self monitoring performed during the month and as presented in this report.

**Explain Method for preserving samples:**

Metal sample was a composite which was preserved with HNO<sub>3</sub> to pH < 2.0. All samples were  
transferred to the laboratory in an ice filled cooler.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988



Signature of Principal  
Executive or Authorized Agent

Michael Gates

Plant Manager

Type Name and Title

12-18-2008

Date

PVSC Form MR-1 Rev.5 3/91 P2

**ASAP LINENS, INC. - LOCAL LIMIT MR-1: NOVEMBER 2008**

INDUSTRIAL METER READINGS	22 WORK DAYS IN MONTH
---------------------------	-----------------------

3717610 Present Meter Reading

-3663480 Past Meter Reading

54130 Cubic Feet

x 7.48

404,892

x.95 (-5% Evaporation)

384,647 Gallons for Outlet # 27220027-1

17,484 GPD = AVG TOTAL LOCAL LIMIT FLOW : OUTLET# 27220027-1  
 22 | 384,647

17,484  
x1.20 (MAX = AVG+20%)  
 20,981 GPD = MAX TOTAL LOCAL LIMIT FLOW : OUTLET# 27220027-1



## ANALYTICAL DATA REPORT

for  
 ASAP Linen  
 36-38 Iowa Ave.  
 Paterson, NJ 07503

Project Name: PVSC MONITORING  
 Lab Case Number: E08-12709

MDL = METHOD DETECTION LIMIT

&lt; = LESS THAN THE MDL

## Metals

Lab ID: 12709-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 11/4/2008

Time Sampled: 09:00

Date Analyzed: 11/7/08

Parameter	Result	Q	MDL
Nickel	0.012		0.004
Zinc	0.031		0.008

## General Analytical

Lab ID: 12709-001

Client ID: 01

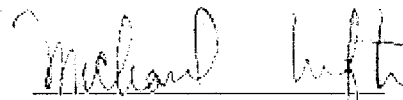
Percent Moisture: 100

Date Sampled: 11/4/2008

Time Sampled: 09:00

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	302	2.00	Aqueous-mg/L	11/5/2008 8:00
Total Suspended Solids	9.00	5.00	Aqueous-mg/L	11/5/2008 10:00

These data have been reviewed and accepted by:

  
 Michael H. Leftin, Ph.D.  
 Laboratory Director

273 Franklin Road  
 Randolph, NJ 07869  
 Phone: 973 361 4252  
 Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (1475-1) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program

**INTEGRATED ANALYTICAL LABORATORIES  
CHAIN OF CUSTODY**

## CUSTOMER INFO

## REPORTING INFO

Company: ASAP LINEN, INC.
Address: 36 - 38 IOWA AVENUE
PATERSON, NJ 07503
Telephone #:
Fax #:
Project Manager:
Sampler: JOHN SABO (ECI)
Project Name: PVSC MONITORING
Project Location (State):
Bottle Order #:
Quote #:

REPORT TO:	ENVIRO-COMP, INC
Address:	PO BOX 3457
	WAYNE, NJ 07474
Attn:	
FAX #	973-633-7643
INVOICE TO:	ENVIRO-COMP
Address:	PO BOX 3457
	WAYNE, NJ 07474
Attn:	
PO #	

## SAMPLE INFORMATION

### Sample Matrix

DW - Drinking Water    AQ - Aqueous    WW - Waste Water  
OI - Oil    LIQ - Liquid (Specify)    OT - Other (Specify)  
S - Soil    SL - Sludge    SOL - Solid    W - Wipe

[illegible]

## ANALYTICAL PARAMETERS

[illegible]

**# BOTTLES &  
PRESERVATIVES**

[illegible]

	Known Hazard:	Yes or No	Describe:
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			
40.			
41.			
42.			
43.			
44.			
45.			
46.			
47.			
48.			
49.			
50.			
51.			
52.			
53.			
54.			
55.			
56.			
57.			
58.			
59.			
60.			
61.			
62.			
63.			
64.			
65.			
66.			
67.			
68.			
69.			
70.			
71.			
72.			
73.			
74.			
75.			
76.			
77.			
78.			
79.			
80.			
81.			
82.			
83.			
84.			
85.			
86.			
87.			
88.			
89.			
90.			
91.			
92.			
93.			
94.			
95.			
96.			
97.			
98.			
99.			
100.			

Conc. Expected

[illegible]

MDL Req: GWOS - SCC - OTHER (SEE COMMENTS)

**KNOWN HAZARD: YES OR NO**      **DESCRIBE:**

*Please print legibly and fill out completely. Samples cannot be processed and the turnaround time will not start until*

any ambiguities have been resolved.

Signature/Company

Date	Time
------	------

Relinquished by:

by: 

1733	1733
------	------

Relinquished by:

by: \_\_\_\_\_

# h

Relinquished by:

---

b7c[illegible]

Reminiscences of:	Polinovich has:
-------------------	-----------------

by:	
here:	

[illegible]

Acquired by:	
Acquired by:	

by.

[illegible]

Comments:

Lab Case #

1876

PAGE: 1 of

## PROJECT INFORMATION

Case No. **E08-12709**Project **PVSC MONITORING**Customer **ASAP Linen**

P.O. #

Contact **John Sabo**Received **11/4/2008 17:30**EMail **ENVIRO43@aol.com**☐ EMail EDDsVerbal Due **11/19/2008**

Phone

Fax **1(973) 633-7643**Report Due **11/26/2008**Report ToBill To

36-38 Iowa Ave.

Enviro-Comp

Paterson, NJ 07503

P.O. Box 3457

Wayne, NJ 07474

Attn: John Sabo

Attn: John Sabo

Report Format **Result Only**

Additional Info

☐ State Form☐ Field Sampling☐ Conditional VOA

Lab ID	Client Sample ID	Depth Top / Bottom	Sampling Time	Matrix	Unit	# of Containers
12709-001	01	n/a	11/4/2008@09:00	Aqueous	ug/L	2

Sample #	Tests	Status	QA Method
001	Nickel - Ni	In Process	200.8
"	Zinc - Zn	In Process	200.8
"	BOD	Run	5210B
"	TSS (Suspended)	Complete	2540D



## INTEGRATED ANALYTICAL LABORATORIES, LLC

## SAMPLE RECEIPT VERIFICATION

CASE NO: E 08

12709

CLIENT:

ASAP Long

COOLER TEMPERATURE: 2° - 6°C: ☒

( See Chain of Custody)

Comments

COC: COMPLETE / INCOMPLETE

KEY

☒ = YES/NA  
☒ = NO

- ☒ Bottles Intact
- ☒ no-Missing Bottles
- ☒ no-Extra Bottles

- ☒ Sufficient Sample Volume
- ☒ no-headspace/bubbles in VOs
- ☒ Labels intact/correct
- ☒ pH Check (exclude VOs)<sup>1</sup>
- ☒ Correct bottles/preservative
- ☒ Sufficient Holding/Prep Time<sup>1</sup>

☐ Sample to be Subcontracted

<sup>1</sup> All samples with "Analyze Immediately" holding times will be analyzed by this laboratory past the holding time. This includes but is not limited to the following tests: pH, Temperature, Free Residual Chlorine, Total Residual Chlorine, Dissolved Oxygen, Sulfite.

ADDITIONAL COMMENTS:

SAMPLE(S) VERIFIED BY:

INITIAL

[Signature]

DATE

11/4/08

CORRECTIVE ACTION REQUIRED:

YES

(SEE BELOW)

NO

[X]

CLIENT NOTIFIED:

YES

Date/ Time:

NO

PROJECT CONTACT:

SUBCONTRACTED LAB:

DATE SHIPPED:

ADDITIONAL COMMENTS:

VERIFIED/TAKEN BY:

INITIAL

[Signature]

DATE

11/6/08

REV 02/05

## Laboratory Custody Chronicle

IAL Case No.

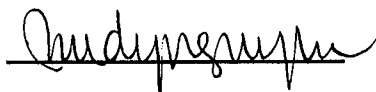
**E08-12709**Client ASAP LinenProject PVSC MONITORINGReceived On 11/ 4/2008@17:30**Department: Metals**

			<u>Prep. Date</u>	<u>Analyst</u>	<u>Analysis Date</u>	<u>Analyst</u>
Nickel - Ni	12709-001	Aqueous	11/ 5/08	Lisa	11/ 7/08	Helge
Zinc - Zn	-001	Aqueous	11/ 5/08	Lisa	11/ 7/08	Helge

**Department: Wet Chemistry**

			<u>Prep. Date</u>	<u>Analyst</u>	<u>Analysis Date</u>	<u>Analyst</u>
BOD	-001	Aqueous	n/a	n/a	11/ 5/08@08:00	Kris
TSS (Suspended)	-001	Aqueous	n/a	n/a	11/ 5/08	Kam

Review and Approval:



**DROP DOWN BOX**NON USE CERTIFICATION MONITORING REPORT  
LOCAL LIMITSNAME: ASAP LINEN

MAILING ADDRESS: \_\_\_\_\_

FACILITY LOCATION: \_\_\_\_\_

CATEGORY & SUBPART \_\_\_\_\_ PERMIT # \_\_\_\_\_ OUTLET #: 27220027-1

CONTACT OFFICIAL: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

I have been authorized to certify non-use for the following heavy metals:

Arsenic \_\_\_\_\_ Lead \_\_\_\_\_ Zinc \_\_\_\_\_

Cadmium \_\_\_\_\_ Mercury \_\_\_\_\_

Chromium \_\_\_\_\_ Molybdenum \_\_\_\_\_

Copper \_\_\_\_\_ Nickel ☒

SAMPLE DATE			
MONTH	DAY	YEAR	
<u>11</u>	<u>04</u>	<u>08</u>	

PARAMETER		CONCENTRATION			SAMPLE TYPE
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	COMP/GRAB
<u>NICKEL</u>	Sample Measurement	<u>0.012</u>	n	<u>mg/l</u> <u>1</u>	<u>Comp.</u>
	Threshold Value	<u>0.02</u>			
	Sample Measurement		TR		
	Threshold Value				
	Sample Measurement		JAN 2009 2nd Input Industrial Dept.		
	Threshold Value				
	Sample Measurement		JAN 2009 2nd Input Industrial Dept.		
	Threshold Value				
	Sample Measurement		JAN 2009 2nd Input Industrial Dept.		
	Threshold Value				
	Sample Measurement		JAN 2009 2nd Input Industrial Dept.		
	Threshold Value				
	Sample Measurement		JAN 2009 2nd Input Industrial Dept.		
	Threshold Value				
	Sample Measurement		JAN 2009 2nd Input Industrial Dept.		
	Threshold Value				